

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	A SYSTEM AND METHOD FOR PROVIDING RESTAURANT RELATED SERVICES
Attorney Docket Number::	NST-001
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	5
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Status::	Full Capacity
Given Name::	Steven
Middle Name:	S.
Family Name::	Heflin
City of Residence::	Foxborough
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	28 Bates Street
City of mailing address::	Foxborough

State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02035

Correspondence Information

Correspondence Customer Number:: 00959

Representative Information

Representative Customer Number:: 00959